U.S. Department of Labor
Office of 4.5bor-Management
Standards
Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30-2006

This report is mandatory under P L. 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 2499	2 Fiscal Year Covered From
	1 / 1 / 05 Through 12 / 31 / 05
3 Name and address of person filing	4 Name file number and address of labor organization
Name Kenneth Dearing	Name UAW Local 325
	Labor Organization File Number 0.3545
PO Box Bidg Room No If any	PO Box Building and Room Number if any
Street 150 Culvre River Drive	Street 9144 Pershall Road
Crty Troy	City Hazelwood 5 5 6 6
State Missouri ZIP Code +4 63379 2,5	State Missouri ZIP Code +4 63042
5 Position in labor organization	
A Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organization.	denved income or other economic benefit of ion represents or is actively seeking to represent 7 a Nature of Interest Transaction or Income
6 Name and address of Employer (including trade name if any)	7 2 Nature of miletest. Hairsaccorr of moonie
Name (
Trade Name if any	Si ton to the second se
PO Box Bidg Room No If any	, s
The state of the s	7 b Amount
Street	
Crty	Action was about the same of t
State ZIP Code + 4	
Sign	nature

3/17/06

Date

(314)

731 – 0490 Telephone Number

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Gerald Kretmar	X a Labor Organization	
Trade Name if any Appleton, Kretmar, Beatty & Stolze	b Trust	
PO Box Bldg Room No fany Suite 900	c Employer	
Street 8000 Maryland Ave.	Necessarial	
City Clayton		
State Missouri ZIP Code +4 63105		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name 1424 204 204 204 204 204 204 204 204 204	Gerald Kretmar and his	
Trade Name If any	UAW Local 325	
P O Box Bldg Room No If any		
Street S	11 b Approximate dollar value of such dealing	
Cny	12 a Nature of interest held or income received	
State ZIP Code + 4	Treceived tickets to the following St Louis Cardinals baseball games: 4/20/05 - 4 @ \$40 00 each 5/6/05 - 4 @ \$40 00 each 6/7/05 - 4 @ \$40 00 each 9/28/05 - 4 @ \$40 00 each 10/15/05 - 2 @ \$50 00 each	
	12 b Amount \$740.00	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment	
Name		
Trade Name if any		
PO Box Bldg Room No If any		
Street 122		
City City City City City City City City		
State ZIP Code + 4 Proj		
13 b Is the Business an Employer 🧖 or Consultant 🔀 ?	14 b Amount of payment	
LEGI PLOT	The state of the s	